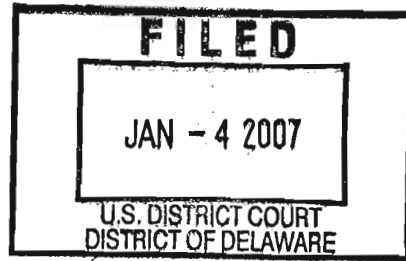


David DeJesus, Sr

COMPLETED  
DEC 19 2006

611



RD scanned

12-20-06

06-209

To: The us District court

This is to ask the court about a letter I got from your office with out a return address on it. Why I ask is because my mail is being mess with and all the time that I getting a letter from your court it always come with your return address on it, In sild is the us Department of Justice marshals service process Receipt and Return. so Here is a copy of the Envelop It dont look right ?

From  
David DeJesus Sr

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF

COURT CASE NUMBER

DEFENDANT

TYPE OF PROCESS

**SERVE****AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served with this Form - 285

#

Number of parties to be served in this case

#

Check for service on U.S.A.

✓

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Forma properis

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

David De Jesus Sr.

7-27-06

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

No. 15

District to Serve

No. 15

Signature of Authorized USMS Deputy or Clerk

Date

BF

8-22-06

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service Time am  
11/29/06 pm

Signature of U.S. Marshal or Deputy

BF

Service Fee

Total Mileage Charges (including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS:

11-29-06 ok for pers. service  
No longer C HAYC1

**NOTE**

PRIOR EDITIONS  
MAY BE USED

**3. NOTICE OF SERVICE**

FORM USM-285 (Rev. 12/15/80)

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF	David De Jesus Sr	COURT CASE NUMBER	06-209-JJF
DEFENDANT	DANA Baker <del>Wendene R. Baker with a/c</del>	TYPE OF PROCESS	complaint
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
➔	<del>Wendene R. Baker with a/c</del> Dana Baker		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
	PO Box 9561 Wilm De 19809		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

David De Jesus Sr  
PO Box 9561  
Wilm. De 19809

Number of process to be served with this Form - 285

1 #

Number of parties to be served in this case

4 #

Check for service on U.S.A.

✓

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Ferna praperis

Signature of Attorney or other Originator requesting service on behalf of:

David De Jesus Sr

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

7-27-06

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

No. 15

District to Serve

No. 5

Signature of Authorized USMS Deputy or Clerk

BF

Date

8-22-06

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

Time

am

11/29/06

pm

Signature of U.S. Marshal or Deputy

BF

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS: 11-29-06 - out for pers service  
no longer @ HAYCI

NOTE

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <u>David De Jesus sr</u>		COURT CASE NUMBER <u>06-209-JJF</u>	
DEFENDANT <u>warden Rephcal Williams</u>		TYPE OF PROCESS <u>complaint</u>	
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>warden Rephcal Williams</u>		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>PO Box 9561 Wilm Dc 19809</u>		
AT			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	<u>1 #</u>
<u>David De Jesus sr</u>		Number of parties to be served in this case	<u>4 #</u>
<u>PO Box 9561</u>		Check for service on U.S.A.	<input checked="" type="checkbox"/>
<u>Wilm Dc 19809</u>			

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
FoldForma ~~XXXXXX~~  
Prnperis

Signature of Attorney or other Originator requesting service on behalf of: <u>David De Jesus sr</u>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE <u>7-27-06</u>
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <u>15</u>	District to Serve No. <u>15</u>	Signature of Authorized USMS Deputy or Clerk <u>BF</u>	Date <u>8-22-06</u>
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service <u>8/27/06</u>
	Time am pm
	Signature of U.S. Marshal or Deputy <u>SE</u>

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

waiver returned

NOTE



U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <u>David DeJesus sr</u>		COURT CASE NUMBER <u>06-209-JJF</u>						
DEFENDANT <u>Attorney General</u>		TYPE OF PROCESS <u>complaint</u>						
<b>SERVE</b> ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Attorney General</u>							
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>820 N French st WDC</u>							
<b>AT</b>								
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:								
<table border="1"> <tr> <td><u>David DeJesus sr</u> <u>PO Box 9561</u> <u>Wilm DC 19809</u></td> <td>Number of process to be served with this Form - 285 <u>1 # 19801</u></td> </tr> <tr> <td></td> <td>Number of parties to be served in this case <u>4 #</u></td> </tr> <tr> <td></td> <td>Check for service on U.S.A. <u>✓</u></td> </tr> </table>			<u>David DeJesus sr</u> <u>PO Box 9561</u> <u>Wilm DC 19809</u>	Number of process to be served with this Form - 285 <u>1 # 19801</u>		Number of parties to be served in this case <u>4 #</u>		Check for service on U.S.A. <u>✓</u>
<u>David DeJesus sr</u> <u>PO Box 9561</u> <u>Wilm DC 19809</u>	Number of process to be served with this Form - 285 <u>1 # 19801</u>							
	Number of parties to be served in this case <u>4 #</u>							
	Check for service on U.S.A. <u>✓</u>							

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

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Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

David DeJesus sr7-27-06**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <u>15</u>	District to Serve No. <u>15</u>	Signature of Authorized USMS Deputy or Clerk <u>BF</u>	Date <u>8-22-06</u>
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.Keith Bradley, Asst. U.S. Marshal

Address (complete only if different than shown above)

Date of Service <u>8/25/06</u>	Time <u>pm</u>
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Signature of U.S. Marshal or Deputy  
G. P. [Signature]

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

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NOTE

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <u>David De Jesus Sr</u>	COURT CASE NUMBER <u>06-209-JJF</u>
DEFENDANT <u>C-M-S</u>	TYPE OF PROCESS <u>complaint</u>

<b>SERVE</b> ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u><del>David De Jesus Sr</del> CMS</u>
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>PO Box 9561 Wilmi De 19809</u>

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: <u>David De Jesus Sr</u> <u>PO Box 9561</u> <u>Wilmi De 19809</u>	Number of process to be served with this Form - 285 <u>1 #</u>
	Number of parties to be served in this case <u>4 #</u>
	Check for service on U.S.A. <input checked="" type="checkbox"/>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
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Prnperis

Signature of Attorney or other Originator requesting service on behalf of: <u>David De Jesus Sr</u>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE <u>7-27-06</u>
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <u>15</u>	District to Serve No. <u>5</u>	Signature of Authorized USMS Deputy or Clerk <u>BF</u>	Date <u>8-22-06</u>
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I hereby certify and return that ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <u>Laura Price - Payroll Mgr - CMS</u>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
--	---

Address (complete only if different than shown above)	Date of Service <u>11/28/06</u>	Time <u>11</u> am
	Signature of U.S. Marshal or Deputy <u>[Signature]</u>	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

NOTE

David De Jesus Sr  
209515  
PO Box 9561  
Wilmington, DE 19809



# 06-209-JJF  
US District court  
844 N King St  
Lock Box 18  
Wilmington DE 19801

U.S.M.  
X-RAY

19801+8519 0012